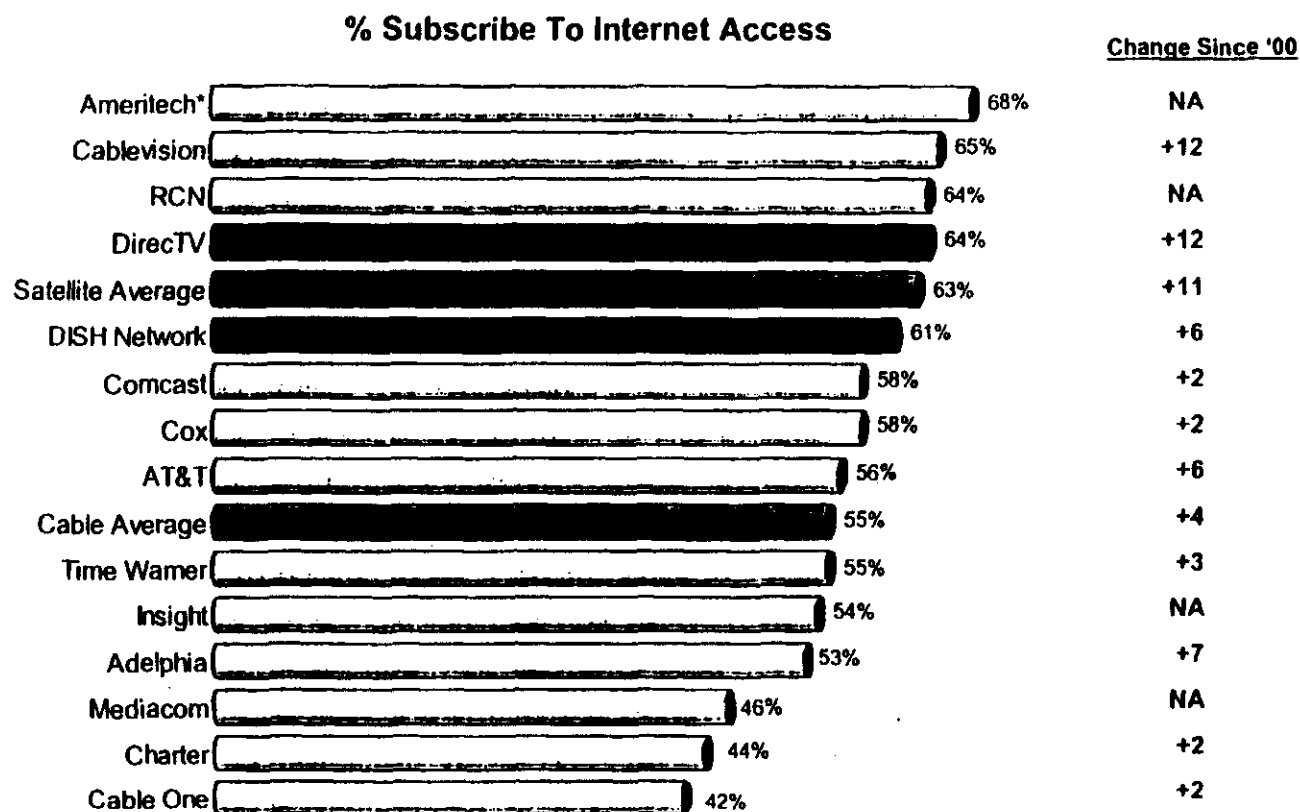


DETAILED FINDINGS

* Internet Usage



More Than Half Of Cable Users And Almost Two-Thirds Of Satellite Users Have Internet Access.



* = americast cable provided by Ameritech

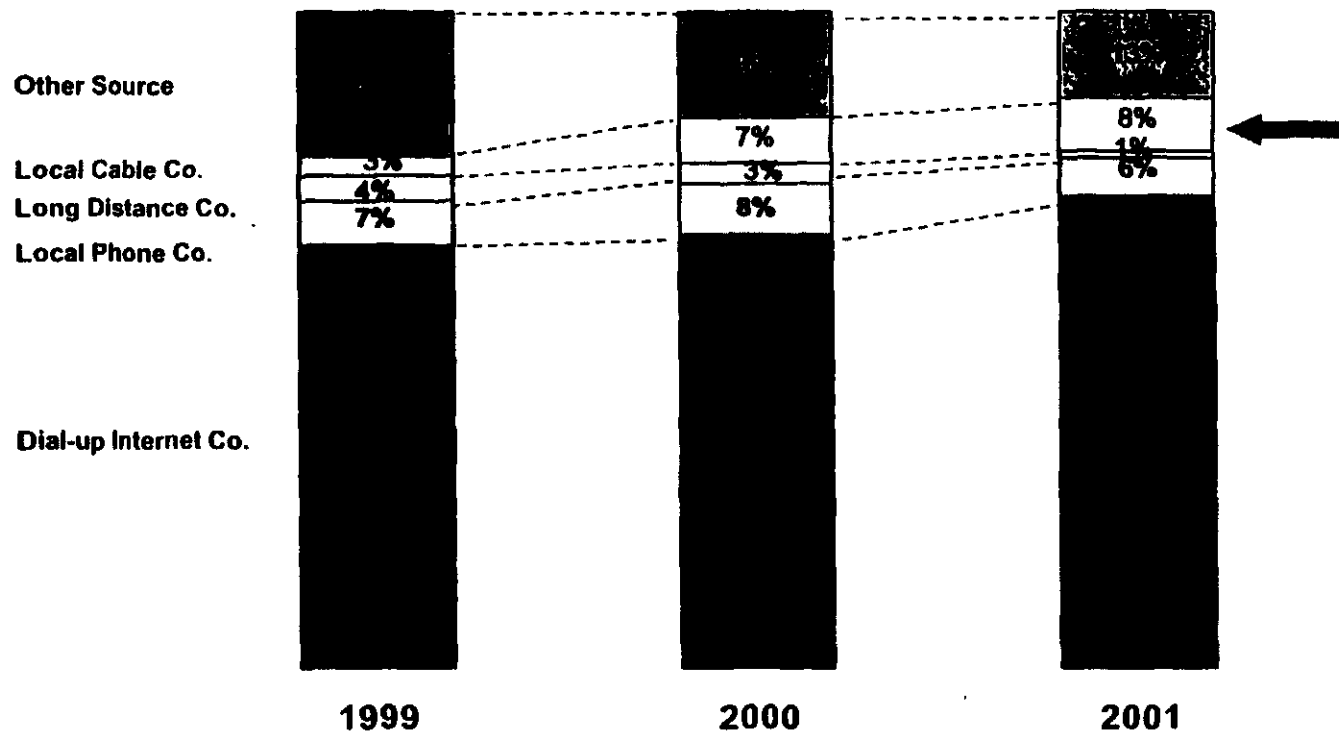
Source: 2001 JDP&A Cable/Satellite CSI Studies



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On Average, 8% Of Cable Households Subscribe To High-Speed Access From Their Cable Company, Rising Slightly From Their Previous Levels Of Penetration (7%).

% Source of Internet Access: Cable HH



Cable Modem Users Have Higher Household Incomes, Live In Larger Households And Live In Suburban Regions More Often Than Dial-up Internet Households.

Cable Modem Vs. Dial-up Internet Connection Demographic Differences

| | Cable Modem Households | Dial-up Connection Households | % Diff. Cable Modem vs. Dial-up Modem |
|-------------------------------|------------------------|-------------------------------|---------------------------------------|
| Age | | | |
| Under 35 | 24% | 21% | |
| 35-64 | 52% | 50% | |
| 65+ | 24% | 29% | |
| Education | | | |
| High School or less | 32% | 30% | |
| College+ | 68% | 70% | |
| Income (In \$K) | | | |
| Less than \$35,000 | 21% | 29% | |
| \$35K to \$50K | 11% | 20% | |
| \$50K or more | 68% | 51% | |
| Mean per year (\$00's) | \$73.7 | \$58.1 | |
| Household Size | | | |
| One | 10% | 19% | |
| Two | 32% | 34% | |
| Three+ | 58% | 47% | |
| Residential Location | | | |
| Urban | 20% | 21% | |
| Suburban | 65% | 54% | |
| Rural | 15% | 25% | |

Cable Modem Users Are Significantly More Satisfied With Their Cable Companies Than Subscribers That Use A Dial-up Internet Connection.

Cable Modem Vs. Dial-up Internet Connection Satisfaction Index Among Cable Households

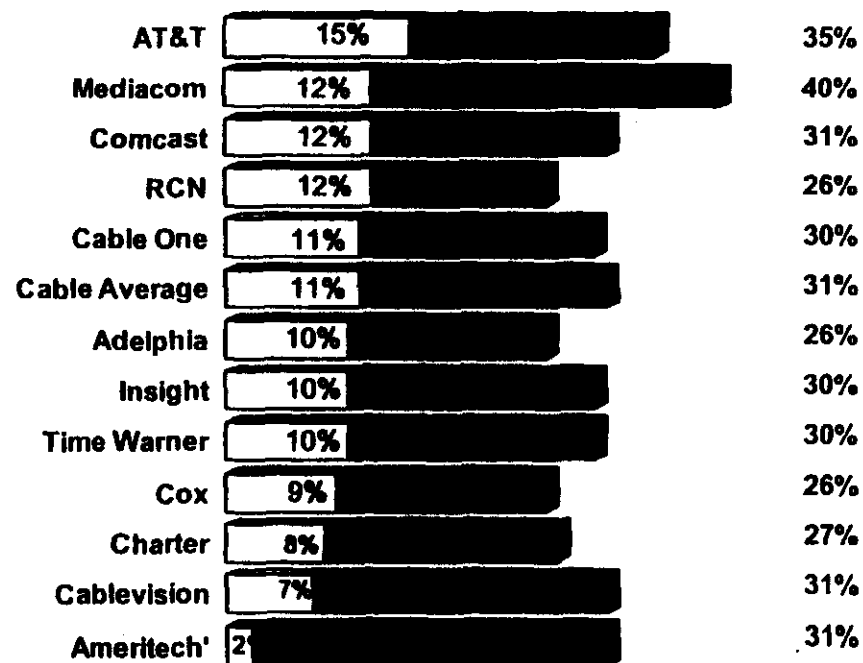
| | Cable Modem | Traditional Internet Connection | Difference |
|---|-------------|---------------------------------|------------|
| OVERALL | 100 | 94 | |
| <i>Cost of Service</i> | 99 | 94 | |
| <i>Credibility/Billing</i> | 101 | 94 | |
| <i>Program Offerings</i> | 101 | 95 | |
| <i>Equipment & Service Capabilities</i> | 103 | 94 | |
| <i>Customer Service</i> | 97 | 95 | |
| <i>Reception Quality</i> | 100 | 91 | |

= Statistically significant above DIAL-UP INTERNET PROVIDER at 95% confidence level

* = Statistically significant below DIAL-UP INTERNET PROVIDER at 95% confidence level

On Average, One In Four Cable Users Is Interested In Subscribing To Cable Internet Access Within The Next 12 Months.

% Extremely/Very/Somewhat Likely To Subscribe To Internet Access With Local Cable Company:
Next 12 Months If High-Speed Access Offered**



□ Extremely/Very ■ Somewhat

* = americast cable provided by Ameritech

** Among those households with dial-up Internet service only

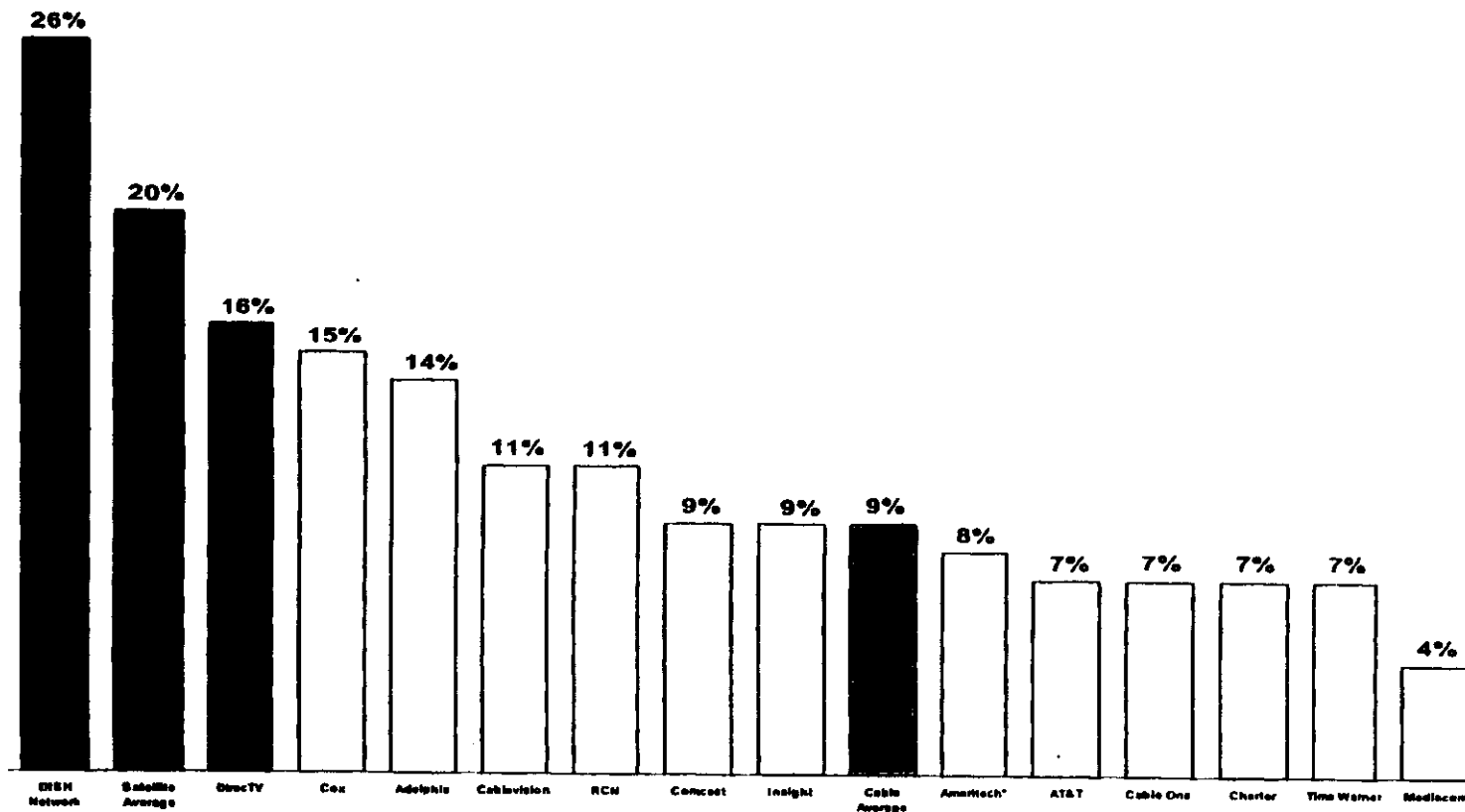
DETAILED FINDINGS

* Web-Based Customer Service Issues



On Average Twice As Many Satellite Users Report Visiting Their Providers Website As Do Cable Users.

% With Internet Access Who Have Visited Their Satellite/Cable Providers Website In Past 6 Months:



* = americast cable provided by Ameritech

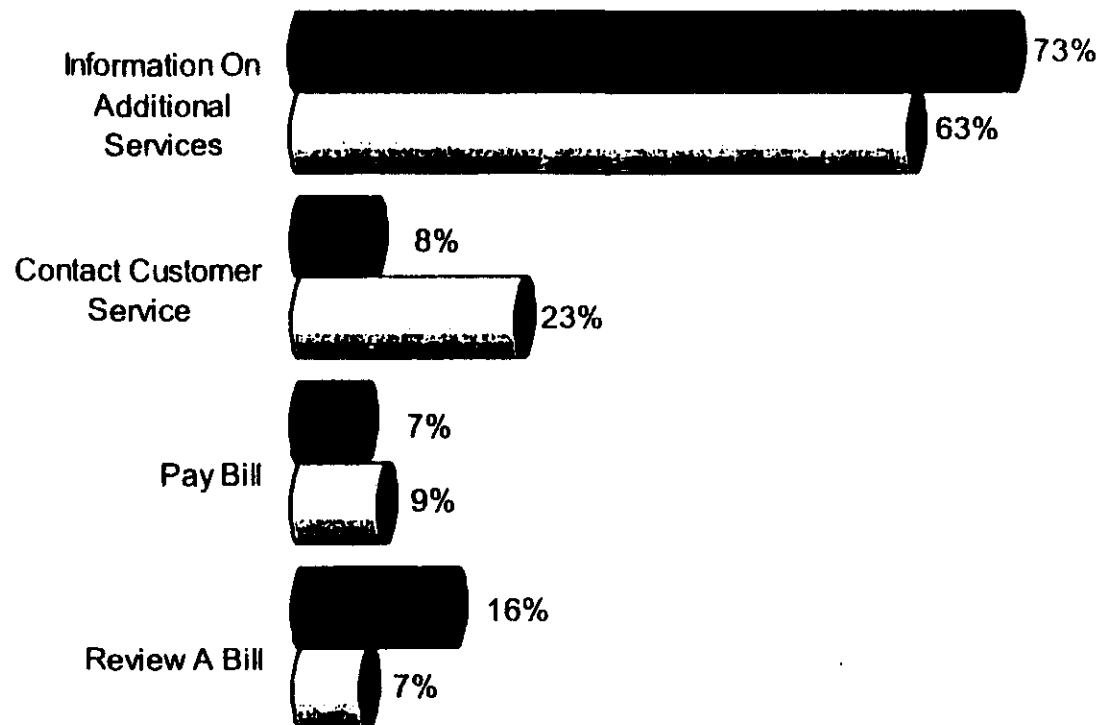
■ Satellite Service Providers
□ Cable Service Providers

Source: 2001 JDP&A Cable/Satellite CSI Studies



Information On Additional Services Is The Reason For Three-Quarters Of The Visits To Both Cable And Satellite Carrier Websites.

% Reasons For Visiting Cable/Satellite Provider Website*

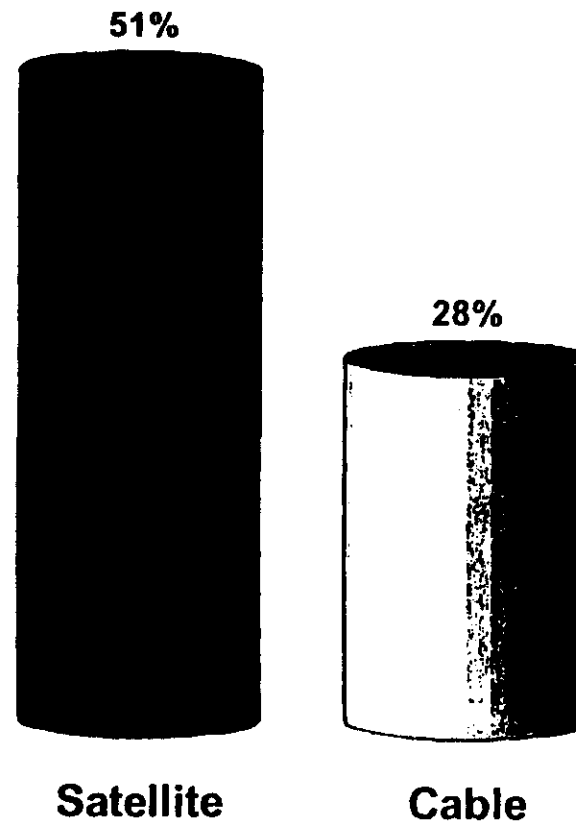


* Among those who visited Cable/Satellite TV provider's website in past 6 months.

Source: 2001 JDP&A Cable/Satellite CSI Studies

Customers That Visited Their Satellite Providers Website Are Much Happier With The Site Than Cable Customers Are With Their Cable Provider's Site.

% "Top 3 Box" Satisfaction With Satellite/Cable Providers Website:



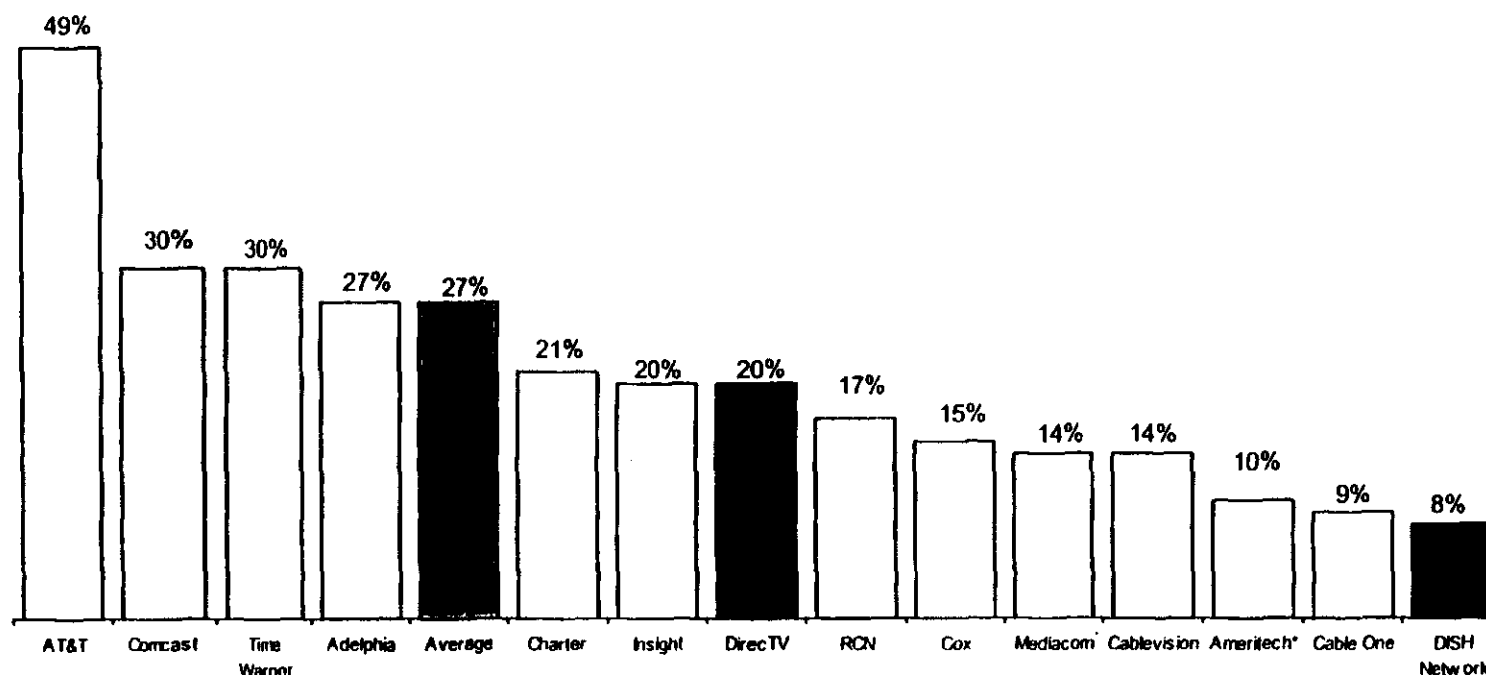
DETAILED FINDINGS

* Impact Of Merger Activity



Almost One-Half Of AT&T Cable/Broadband Customers Are Aware Of Mergers Affecting Their Cable Company...

% Of HHs Who Report Being Aware Of Cable/Satellite Provider Experiencing A Merger:



* = americast cable provided by Ameritech

■ Satellite Service Providers
□ Cable Service Providers

Source: 2001 JDP&A Cable/Satellite CSI Studies

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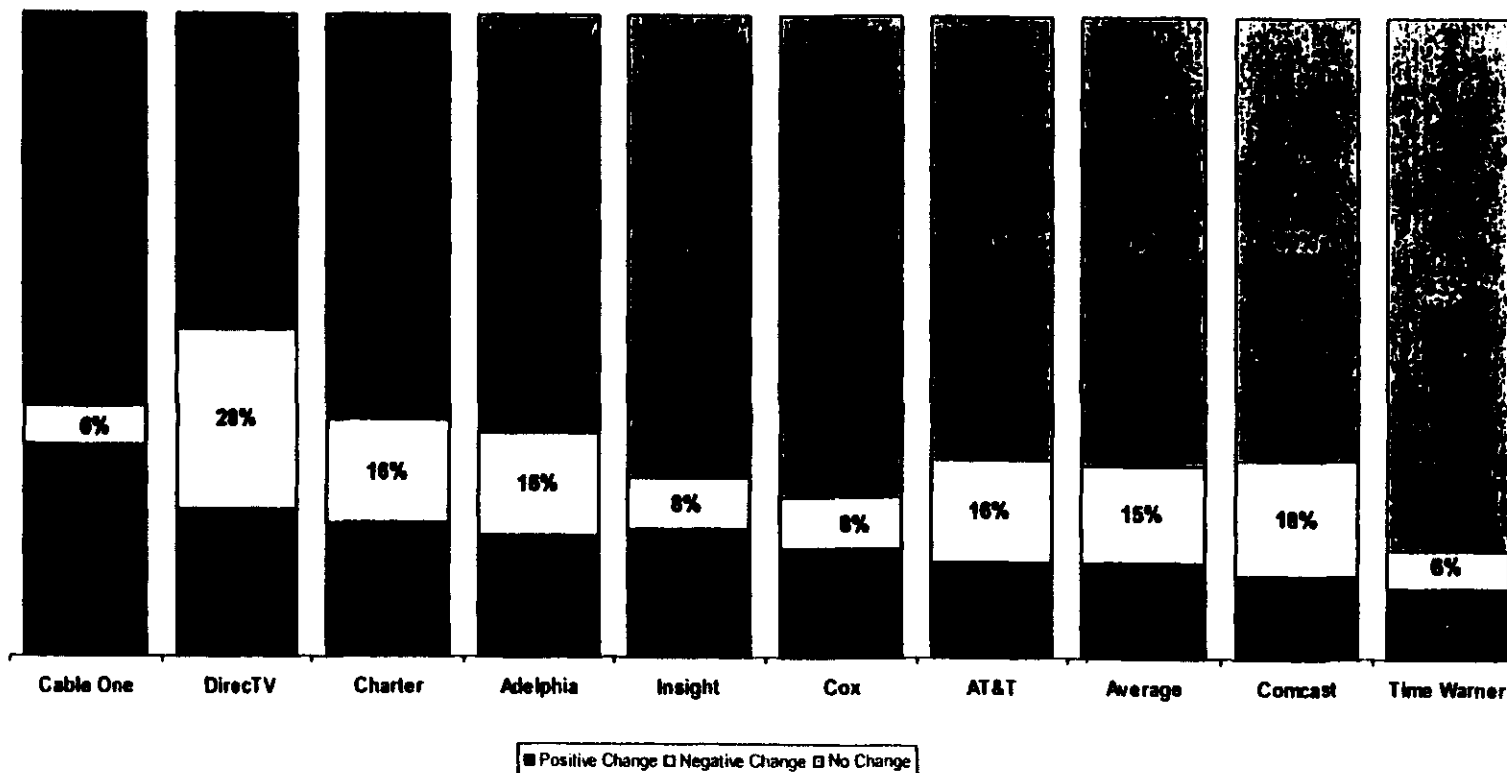
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...More Than One Half Of DirecTV Household Report Experiencing Some Type Of Change In Their Service, Positive Or Negative, The Highest Level Of Any Company.

% Change In Cable/Satellite Service As A Result Of Merger*:



* Excluded: Cable One and DISH Network due to insufficient sample size.

Appendix



Customer Satisfaction Measurement Process



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Data Reduction

• Cost Of Service • Credibility/Billing • Program Offerings
• Equipment & Service Capabilities • Customer Service • Reception Quality

Establish Importance Of Factors Relative To Overall Satisfaction

Combine Weights & Factor Scores Of Respondents

POWER

Example Of How The J.D. Power And Associates' Customer Satisfaction Index Is Calculated

Step 1. Factor Analysis

| <u>Attribute Example</u> | <u>Specific Question</u> | <u>Factors Identified</u> |
|--------------------------|--------------------------|---------------------------|
| The Company's Reputation | Attribute 1 | Factor 1 |
| | Attribute 2 | |
| | Attribute 3 | Factor 2 |
| | Attribute 4 | |
| | Attribute 5 | Factor 3 |
| | Attribute 6 | |

- * Respondents answer a battery of specific satisfaction attribute questions measuring satisfaction level
- * Like attributes then are grouped into unique factors or dimensions using a technique called factor analysis

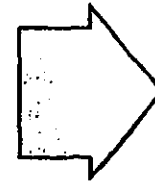
Example Of How The J.D. Power And Associates' Customer Satisfaction Index Is Calculated

Step 2. Calculating Attribute Scores

Attribute 1

"Company's Reputation"

| | | |
|----------------|----|----------------------------|
| Outstanding = | 10 | |
| . | 9 | ← ----- Respondent's Score |
| . | 8 | |
| . | 7 | |
| . | 6 | |
| Average = | 5 | |
| . | 4 | |
| . | 3 | |
| . | 2 | |
| Unacceptable = | 1 | |



* Respondent's answer is converted into a numeric value

Example Of How The J.D. Power And Associates' Customer Satisfaction Index Is Calculated

Step 2. Calculating Attribute Scores

Respondents attribute
score for attribute 1:

9

Mean score of all
respondents for
attribute 1:

7.8

Standard Deviation:

1.5

Scaling Factor:

20

Calculation of respondent's
attribute 1 score:

$$\frac{9 - 7.8}{1.5} \times 20 + 100 = 116$$

- ✧ Each respondent's score for a given attribute is then averaged together
- ✧ The Standard Deviation is computed
- ✧ A Scaling Factor is determined
- ✧ Respondent's score for that attribute is calculated

Example Of How The J.D. Power And Associates' Customer Satisfaction Index Is Calculated

Step 3. Regression Analysis

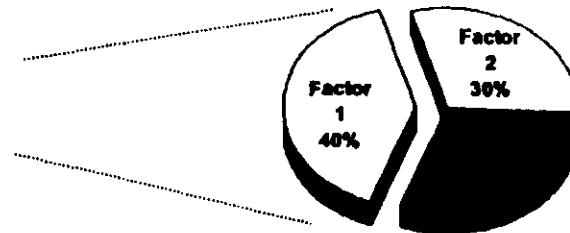
Attribute Weights

Derived
From Factor
Analysis



Attribute 1 weight 20%
Attribute 2 weight 30%
Attribute 3 weight 50%

Factor Weights



- * Attribute weights are derived from Factor Analysis
- * Using a technique called Regression Analysis, the impact of each factor of satisfaction is calculated
- * Those factors which have the most impact are the greatest "discriminators" of overall satisfaction and are expressed as a % of overall satisfaction

Example Of How The J.D. Power And Associates' Customer Satisfaction Index Is Calculated

Step 4. Calculating Factor Scores

| | | | Attribute Score | Attribute Weight | |
|---|-----------------------|-------------------------|--------------------|---------------------|--------------------------------------|
| Calculation Of Respondent's Attribute 1 Score: | $\frac{9 - 7.8}{1.5}$ | $\times 20 + 100 = 116$ | $\times .2$ | $= 23$ | |
| Calculation Of Respondent's Attribute 2 Score: | $\frac{7 - 6.9}{1.2}$ | $\times 20 + 100 = 102$ | $\times .3$ | $= 30$ | |
| Calculation Of Respondent's Attribute 2 Score: | $\frac{8 - 7.5}{1.1}$ | $\times 20 + 100 = 109$ | $\times .5$ | $= 55$ | |
| | | | | | <hr/> |
| | | | | | 108 |
| | | | | | <i>Respondent's Factor Score</i> |

- ✱ Index scores are then calculated for each attribute in that factor
- ✱ Attribute weights are applied
- ✱ Attribute index score are multiplied by the weights and a respondent's factor score is derived

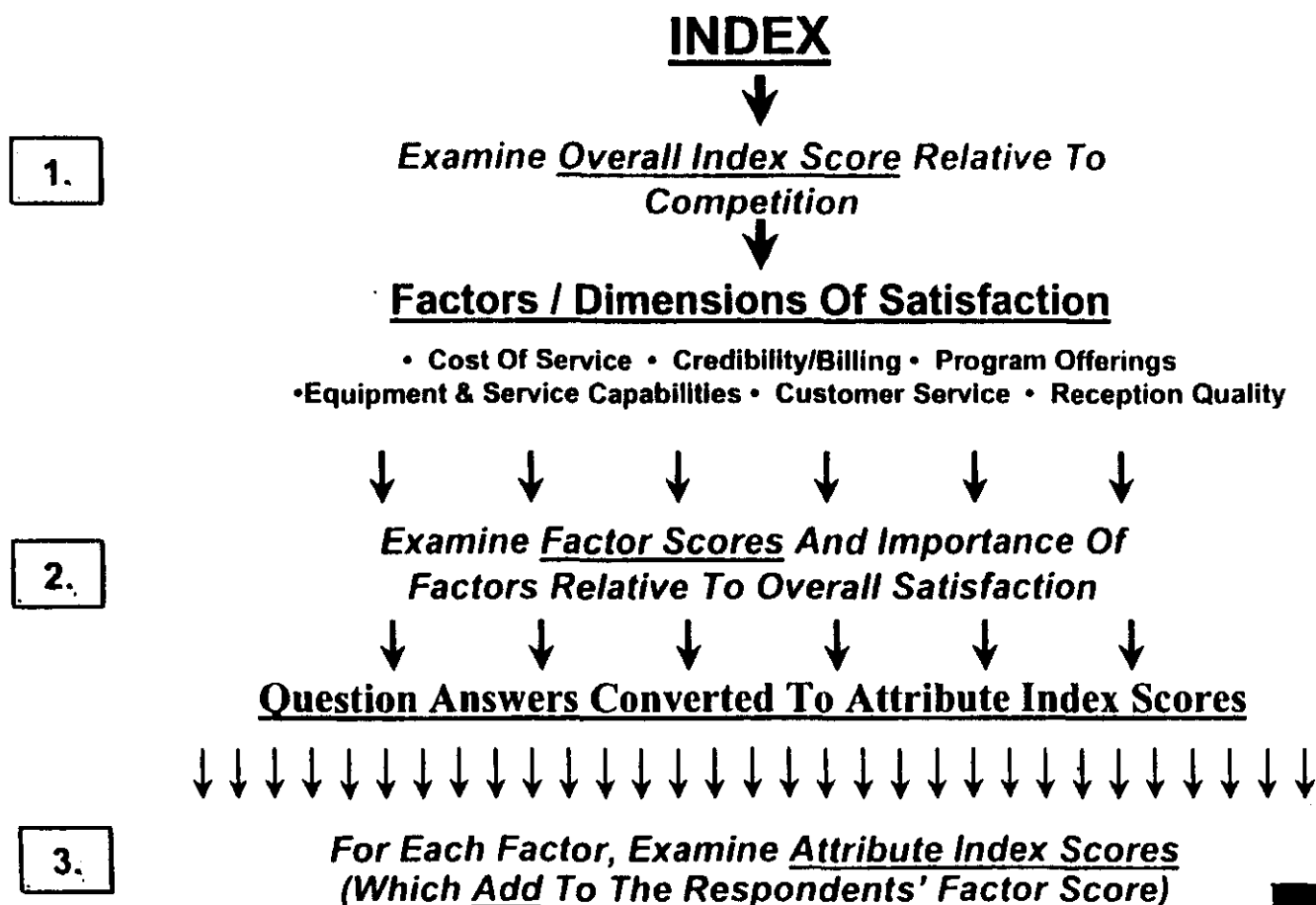
Example Of How The J.D. Power And Associates' Customer Satisfaction Index Is Calculated

Step 5. Calculating The Overall Satisfaction Index

| <u>Factor 1</u> | | <u>Weight 1</u> | | <u>Factor 2</u> | | <u>Weight 2</u> | | <u>Factor 3</u> | | <u>Weight 3</u> | | <u>Overall Satisfaction Score</u> |
|---------------------|---|---------------------|---|---------------------|---|---------------------|---|---------------------|---|---------------------|---|---------------------------------------|
| (106 | X | .3) | + | (105 | X | .4) | + | (96 | X | .3) | = | 103 |

- * An overall satisfaction index score is then calculated by applying the respective factor weight to each respondent's factor score

The J.D. Power And Associates Approach For Analyzing Customer Satisfaction Is To Examine The Three Levels Of Measurements Built Into The Index



Sample And Methodology



2001 Syndicated Residential Cable/Satellite TV Customer Satisfaction Study

◆ Sample And Methodology ◆

The study was conducted in two phases as follows:

Phase I

A screener was mailed to a total sample of 200,000 households, randomly selected from the NPD Consumer Panel* of approximately 330,000 households. The key objectives of the screener were to:

- Establish cable/satellite TV usage, and;
- Identify the primary provider of cable and/or satellite TV service.

A total of 103,569 usable screeners were returned.

Phase II

A twelve-page mail questionnaire was sent to a randomly selected sample of consumers who indicated that they had cable and/or satellite TV service. The sample was defined as follows:

- An overall sample of 6,163 households was selected. This sample was divided into 14 groups, based on cable or satellite carrier. A random sample of 450 respondents per group was selected to be included in this phase.
- Each group of households was balanced demographically to represent the universe of each carrier as defined by the screener. Questionnaires were mailed in late March, 2001 and were addressed to the key decision-maker responsible for selecting the cable or satellite TV service carrier in the household. Each returned questionnaire was validated for completeness, correct carrier and decision-maker names. A total of 4,167 usable questionnaires were received when the field closed at the end of May, 2001, representing a response rate of 68%.

* See page A&R 1 in the "Analysis & Reporting" section for more details on panel

2001 Syndicated Residential Cable/Satellite TV Customer Satisfaction Study

◆ Sample And Methodology ◆

Questionnaire Contents:

The questionnaire with accompanying cover letter was sent to each household in the sample and included the following topics:

- . Overall Opinion of Cable/Satellite TV Provider
- . Customer Satisfaction With Cable/Satellite TV Providers On 40 Attributes
- . Cable/Satellite TV Switching Behavior
- . Satisfaction With Customer Service Experience
- . Evaluation of Digital TV Usage
- . Evaluation of Internet Usage
- . Evaluation of Current Cable/Satellite TV Provider Website
- . Bundling Services
- . Demographic Characteristics/Incidence

Analysis And Reporting



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2001 Syndicated Residential Cable/Satellite TV Customer Satisfaction Study

◆ Analysis And Reporting ◆

Balancing of Household Profile

The NPD Consumer Panel, from which the sample was drawn, consists of approximately 330,000 households. Within this household universe, a continuous maintenance program is maintained to yield a nationally representative return sample. This panel is balanced on six demographic, socio-economic and geographic variables to reflect total U.S. household composition. These six variables include:

- Household size
- Household income
- Age of householder
- Socio-economic status
- Education of householder
- Region and market size

Research has shown that each of the above variables has been identified as being significant societal segments that drive consumer behavior. By establishing these criteria, the returns and responses from the panel are not subject to bias by under-representing or over-representing a specific target group such as single householders, which tend to have a lower response rate. The balancing targets are based upon statistical packages using data from the Current Population Survey of the U.S. Census Bureau.

2001 Syndicated Residential Cable/Satellite TV Customer Satisfaction Study

◆ Analysis And Reporting ◆

Weighting of Data:

The data in this study has been weighted to reflect the 80 million households* who subscribe to cable or satellite TV service, as well as the percentage shares of each carrier, as obtained in the screener. The percentage shares are detailed below:

| Cable Carriers | | Satellite Carriers | |
|----------------------|----------|--------------------|----------|
| | <u>%</u> | | <u>%</u> |
| Adelphia | 8.6 | DirectTV | 58.2 |
| Americast | 0.9 | DISH Network | 33.1 |
| AT&T Cable/Broadband | 21.1 | Other | 8.7 |
| Cablevision | 6.3 | | |
| Cable One | 1.4 | | |
| Charter | 9.4 | | |
| Comcast | 11.7 | | |
| Cox | 8.8 | | |
| Insight | 1.5 | | |
| Mediacom | 1.4 | | |
| RCN | 0.5 | | |
| Time Warner | 17.2 | | |
| Other | 11.2 | | |

* Source: Federal Communications Commission



2001 Syndicated Residential Cable/Satellite TV Customer Satisfaction Study

◆ Analysis And Reporting ◆

Customer Satisfaction Index (CSI):

While the survey covers many areas, an overall index of critical satisfaction components has been constructed for the cable/satellite industry to simplify the review of the information. This Customer Satisfaction Index (CSI) provides a single objective measure by which cable/satellite companies can judge customer satisfaction among their customers particularly relative to competition. A total of 40 attributes were used to obtain the overall index for cable/satellite service. These attributes, along with the relative weights associated with each attribute, were selected via factor analysis and represent a balanced synthesis of customer experiences.

The Customer Satisfaction Index is a synopsis of the data collected through the Syndicated Cable/Satellite Study and is a measurement of relative levels of residential consumer satisfaction. For cable/satellite service, the CSI is based on six related factors. These factors are Cost of Service, Credibility/Billing, Program Offerings, Customer Service, Equipment & Service Capabilities and Reception Quality.

CSI Weighting

Response Weighting: The traditional industry approach of assigning values to responses is used in the first weighting stage of the index. Rating scales are assigned positive values for each point. In this study, a ten point scale with Outstanding to Unacceptable ratings have the following values assigned:

- Outstanding = 10
- Average = 5
- Unacceptable = 1

2001 Syndicated Residential Cable/Satellite TV Customer Satisfaction Study

◆ Analysis And Reporting ◆

Relative Question Weighting: Once values are assigned to responses within a question, the relative importance of each question is determined using factor analysis. Factor analysis is employed as the first step because the original attributes used are not independent of each other. In other words, an individual's experience and response to one question can clearly be affected by an experience and response to another question. For example, there are several attributes in the survey that address the cost of service. There are also some that are related to billing – a closely related concept. The issue of how much weight the cost of service and billing concepts should have in the CSI, and how many variables or components it should contain, is determined using factor analysis.

Sometimes not all variables are ultimately included in this type of analysis. Often variables are deleted from the factor analysis procedure for one or more of the following reasons:

- ⋮ The question yields a low level customer response. As such, the sample size is not large enough to measure customer satisfaction.
- ⋮ The question shows no significant variation across carriers.
- ⋮ The question bears little or no relationship to the other variables.

As a result, below are the six factors detailed below.

- * The first factor (Cost of Service) is derived from five variables all highly correlated on some aspect of the cost of cable/satellite TV service
- * The second factor (Credibility/Billing) is derived from eleven variables all highly correlated on the aspect of the companies' reputation, billing practices and honesty.

2001 Syndicated Residential Cable/Satellite TV Customer Satisfaction Study

◆ Analysis And Reporting ◆

- ※ The third factor (Program Offerings) is comprised of seven variables, which are all highly correlated on some aspect of cable/satellite TV programming
- ※ The fourth factor (Equipment & Service Capabilities) is comprised of five variables, which are highly correlated with equipment and installation issues
- ※ The fifth factor (Customer Service) is comprised of ten variables, which are highly correlated on the aspects of the customer service reps and their timeliness
- ※ The sixth factor (Reception Quality) is comprised of two variables, which are highly correlated on the aspects of picture and sound quality

The attributes are summarized into the six factors based on the results of the factor analysis. Any indexed factor score for a carrier overall above 105 is considered significantly above, while a 95 or lower is considered significantly below the industry average in the 2001 study. By using indexed data, priorities can be readily set in exploiting positive areas and eliminating potential weaknesses versus the competition.

2001 Syndicated Residential Cable/Satellite TV Customer Satisfaction Study

◆ Analysis And Reporting ◆

Factor Weighting: The six factors derived from factor analysis are then used to calculate the overall index score. Because one factor may have a larger or smaller relationship to overall satisfaction than the others, weights for the six factors need to be determined.

Regression analysis is conducted with the overall satisfaction question in this survey to determine what these weights would be.

Relative Importance in Predicting Overall Customer Satisfaction In the Residential Cable/Satellite Industry

| <u>Factor Weights</u> | |
|------------------------------------|----------------|
| <u>Factors/Component Measures:</u> | <u>Overall</u> |
| Cost of Service | 24% |
| Credibility/Billing | 23% |
| Program Offerings | 21% |
| Equipment & Service Capabilities | 14% |
| Customer Service | 10% |
| Reception Quality | 8% |

2001 Syndicated Residential Cable/Satellite TV Customer Satisfaction Study

◆ Analysis And Reporting ◆

Uses & Restrictions Of Information

The information provided by this study is solely for the internal use of each participating company. This means that participating companies must carefully control the dissemination of the study findings within their own organization and among their contractors to prevent the inadvertent release of the information. Information from this study may not be reproduced, sold, given, loaned or quoted to non-participants without the expressed written permission of J.D. Power and Associates.

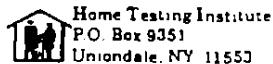
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Questionnaire



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WW4X1E079-1
0401

1

1-8
9-10
11-13

1. Who in your household decides which provider to use for Cable/Satellite TV services? ("X" ONE BOX)

- Female head of household..... ☐ 1-14
Male head of household..... ☐ 2
Both female and male head of household.... ☐ 3
Other household member ☐ 4

THIS SURVEY SHOULD BE FILLED OUT BY THE PERSON IN THE HOUSEHOLD WHO IS RESPONSIBLE FOR DECIDING WHICH PROVIDER IS USED IN YOUR HOUSEHOLD FOR CABLE/SATELLITE TV SERVICES.

2a. Do you currently subscribe to cable TV, satellite TV(DBS) or both? ("X" ONE BOX)

- Cable TV Only ☐ 1-15 → (SKIP TO Q.3a)
Satellite TV(DBS) Only ☐ 1 → (CONTINUE)
Both..... ☐ 3 → (SKIP TO Q.3a)

2b. Is cable TV service available in your area, or not? ("X" ONE BOX)

- Yes ☐ 1-16
No ☐ 2
Don't Know ☐ 3

3a. Which cable and/or satellite TV company(s) does your household currently subscribe to? (PLEASE "X" OR WRITE IN THE EXACT "CABLE AND/OR SATELLITE TV" COMPANY NAME(S) BELOW IN THE SPACE PROVIDED. PLEASE REFER TO YOUR BILL IF YOU ARE NOT SURE OF THE EXACT NAME. IF YOU HAVE BOTH CABLE & SATELLITE TV, INCLUDE BOTH NAMES)

| Cable TV Company Name | | Satellite TV Company Name | |
|---|--|---|--|
| Adelphia Communications.. <input type="checkbox"/> 1-17 | Falcon Cable..... <input type="checkbox"/> 1-18 | DirectTV..... <input type="checkbox"/> 1-20 | |
| Americast via Local Telephone Company..... <input type="checkbox"/> 2 | Insight Communications..... <input type="checkbox"/> 2 | Dish Network (EchoStar)..... <input type="checkbox"/> 2 | |
| AT&T Cable Services (TCV/MediaOne)..... <input type="checkbox"/> 3 | Mediacom Communications... <input type="checkbox"/> 3 | Pegasus..... <input type="checkbox"/> 3 | |
| Cablevision Systems..... <input type="checkbox"/> 4 | Multimedia Cablevision..... <input type="checkbox"/> 4 | Primestar by DirecTV..... <input type="checkbox"/> 4 | |
| Cable One..... <input type="checkbox"/> 5 | RCN..... <input type="checkbox"/> 5 | Superstar Satellite..... <input type="checkbox"/> 5 | |
| Charter Communications... <input type="checkbox"/> 6 | Time Warner Cable..... <input type="checkbox"/> 6 | Other (SPECIFY)..... <input type="checkbox"/> 6 | |
| Comcast Cable..... <input type="checkbox"/> 7 | Your Local Phone Company.. <input type="checkbox"/> 7 | | |
| Cox Communications..... <input type="checkbox"/> 8 | Other (SPECIFY)..... <input type="checkbox"/> 8 | | |

IF CABLE ONLY, SKIP TO Q.4

3b. Do you receive your satellite TV service directly from your satellite TV provider or is it supplied to you by your local telephone company? ("X" ONE BOX)

- Directly from satellite provider..... ☐ 1-22 From your local telephone company..... ☐ 2

3c. Who did you purchase your satellite TV equipment from? ("X" ONE BOX)

- The satellite TV provider itself..... ☐ 1-23
 An independent store selling electronics..... ☐ 2
 Your local telephone company..... ☐ 3
 Other..... ☐ 4

3d. Who installed your satellite TV equipment? ("X" ONE BOX)

- The satellite TV provider itself..... ☐ 1-24
 An independent store selling electronics..... ☐ 2
 Your local telephone company..... ☐ 3
 Yourself/family member/friend..... ☐ 4
 An independent contractor you hired..... ☐ 5
 Other (SPECIFY):

☐ 6

25R

**IF SATELLITE TV SUBSCRIBER ONLY, SKIP TO Q.7.
 CABLE OR CABLE/SATELLITE SUBSCRIBERS, CONTINUE.**

4. Please indicate which of the following describes your cable TV configuration on the TV your household uses most often? ("X" ONE BOX)

- Cable wire directly to TV or VCR without using a set-top converter box... ☐ 1-26
 Cable wire directly to TV or VCR using a set-top converter box..... ☐ 2

5a. Some cable TV providers now offer digital service to their customers. Digital service is a new technology that offers a package of channels that you receive through a special converter box. It gives you access to more premium channels and Pay-Per-View movies and events. Does your cable provider currently offer digital service? ("X" ONE BOX)

- Yes..... ☐ 1-27 } → (CONTINUE)
 No..... ☐ 2 }
 Don't know..... ☐ 3 } → (SKIP TO Q.6a)

5b. Do you subscribe to digital cable service? ("X" ONE BOX)

- Yes..... ☐ 1-28 } → (SKIP TO Q.6b)
 No..... ☐ 2 }
 Don't know..... ☐ 3 } → (CONTINUE)

6a. Assuming it is available, how likely are you to change your current service to digital service from your current cable provider(s) in the next year or so? ("X" ONE BOX)

- Definitely change..... ☐ 1-29 Probably not change..... ☐ 4
 Probably change..... ☐ 2 Definitely not change..... ☐ 5
 Might change..... ☐ 3 Not sure..... ☐ 6

IF CABLE ONLY, ANSWER Q.6b. OTHERS, GO TO Q.7

6b. Have you EVER considered subscribing to satellite TV service? ("X" ONE BOX)

- Yes..... ☐ 1-30 No..... ☐ 2

ALL CONTINUE

7. Approximately how long has your household subscribed to cable and/or satellite TV service with your current provider(s)? ("X" ONE BOX UNDER EACH CATEGORY, IF APPLICABLE)

| | <u>Cable TV</u> | <u>Satellite TV</u> |
|------------------------------------|-------------------------------|-------------------------------|
| Less than 3 months | <input type="checkbox"/> 1-31 | <input type="checkbox"/> 1-32 |
| 3 to less than 6 months | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 |
| 6 months to less than a year | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 |
| 1 year to less than 2 years | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| 2 years to less than 3 years | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| 3 years or more | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

8. Which cable/satellite TV service/package does your household currently subscribe to? ("X" ONE BOX UNDER EACH TYPE OF SERVICE YOU CURRENTLY HAVE)

| | <u>Cable TV</u> | <u>Satellite TV</u> | |
|---|-------------------------------|-------------------------------|-------------------|
| Basic Only (The minimum level of service I can subscribe to) | <input type="checkbox"/> 1-33 | <input type="checkbox"/> 1-34 | → (SKIP TO Q.10a) |
| Expanded Basic plus additional channels for which I pay extra | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 | } → (CONTINUE) |
| Premium (The maximum level of service I can subscribe to) | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 | |

9. What type of programming channels and/or packages attracted your household to subscribe to service packages other than basic cable/satellite TV services? ("X" ALL THAT APPLY)

| | |
|---|-------------------------------|
| Sports (ESPN, NFL, MLB, Golf, MSG, etc.) | <input type="checkbox"/> 1-35 |
| Movie (HBO, Showtime, STARZ, etc.) | <input type="checkbox"/> 2 |
| Special Interest (FoodTV, Home & Garden, Travel, Health, Home Improvement, etc.) | <input type="checkbox"/> 3 |
| Children's Programming (Disney, Nickelodeon, etc.) | <input type="checkbox"/> 4 |
| Multiple channels of free CD quality audio music | <input type="checkbox"/> 5 |
| Access to a wide variety of sports programs | <input type="checkbox"/> 6 |
| Many more Pay-Per-View channels | <input type="checkbox"/> 7 |
| Foreign Language | <input type="checkbox"/> 8 |
| News & Finance (MSNBC, CNN, CNBC, CNNfn, etc.) | <input type="checkbox"/> 9 |
| Culture (BRAVO, A&E, EPC, Sundance, etc.) | <input type="checkbox"/> 0 |
| Home Shopping | <input type="checkbox"/> 1-36 |
| On screen interactive programming guide | <input type="checkbox"/> 2 |
| Multiple channels of premium networks (for example, 10 HBO's, 10 Showtimes, etc.) | <input type="checkbox"/> 3 |
| Other | <input type="checkbox"/> 4 |

- 10a. In an average month, excluding Pay-Per-View movies or events, how much do you pay on a typical cable/satellite bill?

(WRITE IN \$ AMOUNT, ROUND TO THE NEAREST \$) \$ _____ .00 (36-44)

- 10b. In an average month, how many Pay-Per-View movies or events, if any, does your household order?

(WRITE IN NUMBER) MOVIES _____ (37-39)

IF "0" TO BOTH, SKIP TO Q.11

(WRITE IN NUMBER) EVENTS _____ (40-42)

- 10c. How does this amount of Pay-Per-View usage compare to a year ago? Would you say you order Pay-Per-View movies and events... ("X" ONE BOX FOR EACH)

MOVIES

More often than a year ago

☐ 1-43

About the same as a year ago

☐ 2

Less often than a year ago

☐ 3

EVENTS

More often than a year ago

☐ 4

About the same as a year ago

☐ 5

Less often than a year ago

☐ 6

51-79R
80=2

IF YOU HAVE BOTH CABLE & SATELLITE TV, RATE YOUR SATELLITE TV PROVIDER

11. Now we would like you to rate your cable/satellite TV provider on several attributes. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate each of the following attributes. ("X" ONE BOX FOR EACH STATEMENT. IF YOU HAVE BOTH CABLE & SATELLITE TV, RATE YOUR SATELLITE TV PROVIDER)

| | Unacceptable | | | | Average | | | | Outstanding | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Equipment that is easy to operate (boxes, remotes) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Active in supporting activities and causes in your community..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Keeps service outages to a minimum..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Cost of adding additional channels to your package..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Makes it easy to find something to watch..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Offers the services you want in your area..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Offers channels that you like to watch as part of the "basic" cable/satellite package..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The cost of adding service to two or more sets..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Clarity of reception..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The total cost of monthly service..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The initial cost of installation of equipment/service options..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The company's reputation..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The ease of understanding company correspondence, like bill inserts and other company information..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The availability of a variety of methods to pay your bill..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The ability to restore service quickly after temporary interruptions or outages..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Keeps you informed about new services or promotions..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The accuracy of your monthly bill..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Provides variety of programming "packages" to choose from to meet viewing needs..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The company's honesty with no gimmicks, misleading ads, or hidden charges..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The company's ability to stand behind the service they sell..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Timeliness in making adjustments to your bill..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The ease of understanding your monthly TV bill..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Provides good value..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Is a technical innovator in the industry..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The ease of ordering "Pay-Per-View" movies/programs such as concerts or sporting events..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Offers special discounts on select channels or free special events..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Consistently delivers clear reception on all channels..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| The number of channels available..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Provides replacement or loaner equipment..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Provides local programming (i.e. local news and weather)..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |

12. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate your overall experience with your cable/satellite TV provider. ("X" ONE BOX. IF YOU HAVE BOTH CABLE & SATELLITE TV, RATE YOUR SATELLITE TV PROVIDER ONLY)

| Unacceptable | 2 | 3 | 4 | 5 | Average | 6 | 7 | 8 | 9 | Outstanding | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| 1 | | | | | | | | | | 10 | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |

13. When was the last time you had any problems or questions concerning your cable or satellite TV service, excluding calls to order Pay-Per-View movies/events? ("X" ONE BOX)

| | | | | | | | |
|--|--------------------------|------|----------------|-------------------------|--------------------------|---|---------------------|
| Less than 1 month ago..... | <input type="checkbox"/> | 1-45 | } → (CONTINUE) | A year ago or more..... | <input type="checkbox"/> | 4 | } → (SKIP TO Q.17a) |
| 1 to less than 7 months ago..... | <input type="checkbox"/> | 2 | | Never..... | <input type="checkbox"/> | 5 | |
| 7 months to less than 12 months ago..... | <input type="checkbox"/> | 3 | | | | | |

**IF YOU HAVE HAD EXPERIENCE WITH BOTH YOUR CABLE & SATELLITE TV,
RATE YOUR SATELLITE TV PROVIDER**

- 14a. In the past 12 months, how many times have you contacted your cable or satellite TV provider with any questions or problems with your service?

(WRITE IN NUMBER) _____ → (IF "0", SKIP TO Q.17a) (46-47)

- 14b. How many of these contacts concerning your questions or problems with your cable or satellite TV service were completely resolved on the telephone by an automated response system?

(WRITE IN NUMBER) _____ (48-49)

- 14c. And how many times did you speak with a customer service representative directly about a question or problem with your cable or satellite TV service?

(WRITE IN NUMBER) _____ (50-51)

- 14d. Which of the following problems or questions have you had with your cable or satellite TV service in the past 12 months? ("X" ALL THAT APPLY)

| | | | |
|---|-------------------------------|--|-------------------------------|
| Temporary outages (less than 1 hour)..... | <input type="checkbox"/> 1-52 | Extended outages (more than 1 hour)..... | <input type="checkbox"/> 1-53 |
| Change type of programming package..... | <input type="checkbox"/> 2 | Installation of new cable/satellite service..... | <input type="checkbox"/> 2 |
| Add additional channels to existing package..... | <input type="checkbox"/> 3 | Billing..... | <input type="checkbox"/> 3 |
| Drop channels from existing package..... | <input type="checkbox"/> 4 | Services/features offered..... | <input type="checkbox"/> 4 |
| Add additional TVs to service..... | <input type="checkbox"/> 5 | Rates too high/raised rates..... | <input type="checkbox"/> 5 |
| Equipment problems with converter box/ remote control..... | <input type="checkbox"/> 6 | Request a service call..... | <input type="checkbox"/> 6 |
| Add cable modem/Internet access..... | <input type="checkbox"/> 7 | Add phone service..... | <input type="checkbox"/> 7 |
| Upgrade/change service to digital..... | <input type="checkbox"/> 8 | Problems/issues with phone service..... | <input type="checkbox"/> 8 |
| Problems/issues with cable modem/Internet access..... | <input type="checkbox"/> 9 | Pay-Per-View Movies..... | <input type="checkbox"/> 9 |
| | | Pay-Per-View Events..... | <input type="checkbox"/> 0 |

**IF YOU HAVE HAD EXPERIENCE WITH BOTH YOUR CABLE & SATELLITE TV PROVIDERS,
RATE YOUR SATELLITE TV PROVIDER**

- 15a. Now we have some questions about your most recent customer service experience with or perceptions of your Cable/Satellite TV provider. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate each of the following attributes. ("X" ONE BOX ACROSS FROM EACH ATTRIBUTE. IF YOU HAVE NOT CONTACTED THE CUSTOMER SERVICE DEPARTMENT, ANSWER BASED ON WHAT YOU'VE SEEN OR HEARD)

| | Unacceptable | | | | Average | | | Outstanding | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Has courteous customer service representatives..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |
| Can get through to customer service without being put on hold or transferred to different departments..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |
| Has knowledgeable customer service representatives..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |
| The ability to resolve your service issues in a timely manner..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |
| Promptly makes changes to your service when you request them..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1B) |
| Thoroughness of information provided..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |
| Has customer service representatives who are responsive to my question or problem..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |
| Has a user-friendly automated response system..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |
| Has convenient customer service hours..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |
| The time it takes to reach a customer service representative..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |

- 15b. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate your overall experiences with the customer service provided by your cable/satellite TV provider. ("X" ONE BOX. IF YOU HAVE BOTH CABLE & SATELLITE TV, RATE YOUR SATELLITE TV PROVIDER ONLY)

| Unacceptable | | | | Average | | | Outstanding | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1A) |

IF 1 OR MORE CONTACTS IN Q. 14C, CONTINUE. OTHERS SKIP TO Q.17a.

+

+

16a. Now I would like you to think about the last time you contacted your cable or satellite TV service's customer service department. What problem or question best describes the reason for your last contact with your Cable/Satellite TV provider ("X" ALL THAT APPLY)

- | | | | |
|---|-------------------------------|--|-------------------------------|
| Temporary outages (less than 1 hour)..... | <input type="checkbox"/> 1-65 | Extended outages (more than 1 hour)..... | <input type="checkbox"/> 1-66 |
| Change type of programming package..... | <input type="checkbox"/> 2 | Installation of new cable/satellite service..... | <input type="checkbox"/> 3 |
| Add additional channels to existing package..... | <input type="checkbox"/> 3 | Billing..... | <input type="checkbox"/> 3 |
| Drop channels from existing package..... | <input type="checkbox"/> 4 | Services/features offered..... | <input type="checkbox"/> 4 |
| Add additional TVs to service..... | <input type="checkbox"/> 5 | Rates too high/raised rates..... | <input type="checkbox"/> 5 |
| Equipment problems with converter box/ remote control..... | <input type="checkbox"/> 6 | Request a service call..... | <input type="checkbox"/> 6 |
| Add cable modem/Internet access..... | <input type="checkbox"/> 7 | Add phone service..... | <input type="checkbox"/> 7 |
| Upgrade/change service to digital..... | <input type="checkbox"/> 8 | Problems/Issues with phone service..... | <input type="checkbox"/> 8 |
| Problems/Issues with cable modem/Internet access..... | <input type="checkbox"/> 9 | Pay-Per-View Movies..... | <input type="checkbox"/> 9 |
| | | Pay-Per-View Events..... | <input type="checkbox"/> 0 |

16b. Was the first contact about your cable or satellite TV service able to resolve your question or problem? ("X" ONE BOX)

- First contact resolved question/problem..... ☐ 1-67
Transferred..... ☐ 2

16c. Was the question or problem with your cable or satellite TV service resolved in a timely manner? ("X" ONE BOX)

- Yes..... ☐ 1-68 No..... ☐ 2

16d. How many contacts did it take to resolve your most recent cable or satellite TV service question or problem?

(WRITE IN NUMBER OF CONTACTS) _____ (69-70) Problem was not resolved..... ☐ 1-69

17a. My next few questions are about any experience you have had with the cable/satellite service technicians. In the past year, did you have an in-house service call or installation of new service?

- Yes..... ☐ 1-71 → (CONTINUE)
No..... ☐ 2 → (SKIP TO INSTRUCTIONS
BEFORE Q.18a)

17b. Can you please describe the reason for the most recent in-home service or installation call? ("X" ONE BOX)

- | | |
|---|-------------------------------|
| Added additional outlets for additional TV's..... | <input type="checkbox"/> 1-72 |
| Changed service from analog to digital..... | <input type="checkbox"/> 2 |
| Changed service from digital back to analog..... | <input type="checkbox"/> 3 |
| Extended outages (more than 1 hour)..... | <input type="checkbox"/> 4 |
| Installed cable TV without set top box..... | <input type="checkbox"/> 5 |
| Installed high speed Internet access..... | <input type="checkbox"/> 6 |
| Installed phone service..... | <input type="checkbox"/> 7 |
| Installed satellite..... | <input type="checkbox"/> 8 |
| Installed set top box..... | <input type="checkbox"/> 1-73 |
| Problems with equipment..... | <input type="checkbox"/> 2 |
| Problems with reception..... | <input type="checkbox"/> 3 |
| Reconnected cable service..... | <input type="checkbox"/> 4 |
| Other (SPECIFY): | |

_____ ☐ 5 74R

17c. And about how long ago was that service or installation completed? ("X" ONE BOX)

- | | | |
|--|-------------------------------|---|
| Less than 1 month ago..... | <input type="checkbox"/> 1-75 | } → (CONTINUE) |
| 1 to less than 7 months ago..... | <input type="checkbox"/> 2 | |
| 7 months to less than 12 months ago..... | <input type="checkbox"/> 3 | |
| A year ago or more..... | <input type="checkbox"/> 4 | } → (SKIP TO INSTRUCTIONS BEFORE Q. 18a) |
| Never..... | <input type="checkbox"/> 5 | |

17d. Did the Cable/Satellite company contact you prior to the arrival of the technician? ("X" ONE BOX)

- Yes..... ☐ 1-76
No..... ☐ 2
Don't know..... ☐ 3

77-79R
80-81

+

+

- 17e. Now we have some questions about your most recent installation or home service experience with your Cable/Satellite TV provider technician. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate the cable/satellite TV provider technician for each attribute listed below. ("X" ONE BOX ACROSS FROM EACH ATTRIBUTE.)

| | Unacceptable | | | | Average | | | Outstanding | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Technician arriving for service when promised | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Convenience of service/installation hours | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Technician leaving the work area clean | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Technician taking the time to explain the problem or new product operation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Providing replacement or loaner equipment when needed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Technician checks to ensure service or new installation works properly | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Technician spending the time necessary to answer all your questions | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Professional appearance of the technician | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Courteous manner of the technician | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |

- 17f. Using a 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate your overall experience with your most recent installation or home service experience with your Cable/Satellite TV provider technician? ("X" ONE BOX)

| Unacceptable | 1 | 2 | 3 | 4 | 5 | Average | 6 | 7 | 8 | 9 | Outstanding | 10 | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |

IF YOU HAVE DIGITAL CABLE SERVICE CONTINUE. OTHERWISE SKIP TO Q. 19.

- 18a. You mentioned that you subscribe to digital cable service from your cable TV provider. Approximately how long has your household subscribed to digital cable service from that provider? ("X" ONE BOX)

| | | |
|------------------------------------|--------------------------|------|
| Less than 3 months | <input type="checkbox"/> | 1-24 |
| 3 to less than 6 months | <input type="checkbox"/> | 2 |
| 6 months to less than a year | <input type="checkbox"/> | 3 |
| 1 year to less than 2 years | <input type="checkbox"/> | 4 |
| 2 years or more | <input type="checkbox"/> | 5 |
| Don't know | <input type="checkbox"/> | 6 |

- 18b. Now we would like you to rate your experience to date with each of the following features of your current digital service. Using a 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate your experience with digital service provided by your cable provider. ("X" ONE BOX ACROSS FROM EACH ATTRIBUTE.)

| | Unacceptable | | | | Average | | | Outstanding | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Ease of ordering Pay-Per-View movies or events/specials | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The selection of Pay-Per-View movies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The number of Pay-Per-View movies being offered | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The selection of Pay-Per-View events or specials | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The number of Pay-Per-View events or specials being offered | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Ease of using the onscreen channel guide | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| Usefulness of the onscreen channel guide | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The selection of Digital music channels | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The selection of premium channels | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The number of premium channels | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The picture quality of your digital service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The selection of sports programming/events available to you | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The number of sports programming/events being offered | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The sound quality of your digital service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |
| The reliability of your digital service (e.g. blackouts, outages) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |

- 18c. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate your overall experience with your digital service in terms of value for the money? ("X" ONE BOX)

| Unacceptable | 1 | 2 | 3 | 4 | 5 | Average | 6 | 7 | 8 | 9 | Outstanding | 10 | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (AA) |

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(Please Continue On Next Page)

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- 18d. And how satisfied are you with digital service compared to when you had regular analog cable service? ("X" ONE BOX)

Much more satisfied with digital ☐ 1-41
 Somewhat more satisfied with digital ☐ 2
 About equally satisfied with digital ☐ 3
 Somewhat less satisfied with digital ☐ 4
 Much less satisfied with digital ☐ 5

19. Prior to using your current cable/satellite TV provider in your current location, did your household subscribe to... ("X" ONLY ONE BOX FOR EACH STATEMENT)

Yes **No**
 (Another) Cable TV provider ☐ 1-42 ☐ 2
 (Another) Satellite TV provider ☐ 1-43 ☐ 2

IF YES, CONTINUE. IF NO TO BOTH, SKIP TO Q.22

20. Which Cable or Satellite provider if any, did your household subscribe to just prior to the one you're using now? ("X" ONE BOX)

| <u>Cable TV Company Name</u> | | <u>Satellite TV Company Name</u> | |
|---|---|---|--|
| Adelphia Communications... <input type="checkbox"/> 1-44 | Insight Communications... <input type="checkbox"/> 1-45 | DirecTV <input type="checkbox"/> 1-47 | |
| Americast via Local Telephone Company... <input type="checkbox"/> 2 | Local Telephone Company... <input type="checkbox"/> 2 | Dish Network (EchoStar)... <input type="checkbox"/> 2 | |
| AT&T Cable Services (TCI/MediaOne) <input type="checkbox"/> 3 | Jones Interchangeable... <input type="checkbox"/> 3 | Pegasus <input type="checkbox"/> 2 | |
| Bresnan Communications... <input type="checkbox"/> 4 | Marcus Cable <input type="checkbox"/> 4 | Primestar by DirecTV <input type="checkbox"/> 4 | |
| Cablevision Systems... <input type="checkbox"/> 5 | MediaCom Communications... <input type="checkbox"/> 5 | Superstar Satellite <input type="checkbox"/> 5 | |
| Cable One <input type="checkbox"/> 6 | MediaOne (Continental) <input type="checkbox"/> 6 | Other (SPECIFY) _____ <input type="checkbox"/> 6 | |
| Century Communications... <input type="checkbox"/> 7 | Multimedia Cablevision... <input type="checkbox"/> 7 | | |
| Charter Communications... <input type="checkbox"/> 8 | RCN <input type="checkbox"/> 8 | | |
| Comcast Cable <input type="checkbox"/> 9 | TCA Cable Partners <input type="checkbox"/> 9 | | |
| Cox Communications <input type="checkbox"/> 0 | Tele-Communications (TCI)... <input type="checkbox"/> 0 | | |
| Falcon Cable <input type="checkbox"/> 1 | Time Warner Cable <input type="checkbox"/> 1 | | |
| Lenfest Communications... <input type="checkbox"/> 2 | Other (SPECIFY) _____ <input type="checkbox"/> 2 | | |

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21. Overall, how satisfied are you with your current Cable/Satellite TV provider compared to your previous provider (THE ONE YOU "X'd" IN Q.20)? Thinking about your current Cable/Satellite TV provider, would you say you are... ("X" ONE BOX)

Much more satisfied with current provider ☐ 1-49
 Somewhat more satisfied with current provider ☐ 2
 About equally satisfied with current provider ☐ 3
 Somewhat less satisfied with current provider ☐ 4
 Much less satisfied with current provider ☐ 5

22. Within the next 12 months, is your household planning to... ("X" ONE BOX UNDER EACH APPLICABLE CATEGORY)

| <u>Cable TV Subscribers</u> | <u>Satellite TV Subscribers</u> |
|---|---|
| Subscribe to satellite TV <input type="checkbox"/> 1-50 | Subscribe to cable TV <input type="checkbox"/> 1-51 |
| Switch to another cable TV company <input type="checkbox"/> 2 | Switch to another satellite TV company <input type="checkbox"/> 2 |
| Stay with current provider <input type="checkbox"/> 3 | Stay with current provider <input type="checkbox"/> 3 |
| Discontinue cable TV service <input type="checkbox"/> 4 } → (SKIP TO Q.25a) | Discontinue satellite TV service <input type="checkbox"/> 4 } → (SKIP TO Q.25a) |

23. Which Cable or Satellite provider are you likely to switch to in the next 12 months ("X" ONE BOX)

| <u>Cable TV Company Name</u> | | <u>Satellite TV Company Name</u> | |
|---|---|---|--|
| Adelphia Communications... <input type="checkbox"/> 1-52 | Insight Communications... <input type="checkbox"/> 1-53 | DirecTV <input type="checkbox"/> 1-55 | |
| Americast via Local Telephone Company... <input type="checkbox"/> 2 | MediaCom Communications... <input type="checkbox"/> 2 | Dish Network (EchoStar)... <input type="checkbox"/> 2 | |
| AT&T Cable Services (TCI/MediaOne) <input type="checkbox"/> 3 | Multimedia Cablevision... <input type="checkbox"/> 3 | Pegasus <input type="checkbox"/> 3 | |
| Cablevision Systems... <input type="checkbox"/> 4 | RCN <input type="checkbox"/> 4 | Primestar by DirecTV <input type="checkbox"/> 4 | |
| Cable One <input type="checkbox"/> 5 | Time Warner Cable... <input type="checkbox"/> 5 | Superstar Satellite <input type="checkbox"/> 5 | |
| Charter Communications... <input type="checkbox"/> 6 | Your Local Phone Company... <input type="checkbox"/> 6 | Other (SPECIFY) _____ <input type="checkbox"/> 6 | |
| Comcast Cable... <input type="checkbox"/> 7 | Other (SPECIFY) _____ <input type="checkbox"/> 7 | | |
| Cox Communications <input type="checkbox"/> 8 | | | |
| Falcon Cable <input type="checkbox"/> 9 | | | |

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24. What are the top three reasons you would consider switching your current Cable or Satellite TV provider in the next 12 months? ("X" TOP 3 REASONS)

New service has the ability to provide all my communication needs (e.g. cellular, paging, Internet, long distance, etc.) ☐ 1-57
 Prices offered by new provider ☐ 2
 Features or services offered by new service ☐ 3
 Special subscription or promotion offered by new service ☐ 4
 New service offers lower price/cost for TV programs ☐ 5
 Unhappy with current company's service ☐ 6
 Wanted to try satellite ☐ 7
 Wanted to try cable ☐ 8
 Current service doesn't offer local programming ☐ 9
 Wanted to try something new ☐ 0
 New service provides bonus/free offers with affiliated services ☐ 1-58
 The number of channels/programs available ☐ 2
 Provider offers superior picture and sound quality ☐ 3
 Want more reliable service/fewer outages ☐ 4
 Want to try digital cable service ☐ 5
 Current company raised rates/cost of service ☐ 6
 Provider offers choice/variety of channels/programs I want to watch ☐ 7
 Offers high speed Internet access ☐ 8

- 25a. Does your cable company offer local and/or long distance telephone service?

Yes, cable company offers telephone service ☐ 1(AA)
 No, cable company does not offer telephone service ☐ 2

- 25b. Currently in some areas, it is possible for you to choose which company provides you with LOCAL TELEPHONE SERVICE. If you had the opportunity in your area, how likely would you be to switch to a cable company to provide you with local telephone service assuming the rate you would pay is similar to what you are paying now? ("X" ONE BOX)

Definitely switch ☐ 1-39 Probably not switch ☐ 4
 Probably switch ☐ 2 Definitely not switch ☐ 5
 Might switch ☐ 3 Already have switched to a cable company ☐ 6

NOW WE'D LIKE YOU TO THINK ABOUT INTERNET/ON-LINE ACCESS.

26. Do you or does anyone in your household currently subscribe to Internet/On-Line access at home for personal use? ("X" ONE BOX)

Yes ☐ 1-60 → (SKIP TO Q.28) No ☐ 1 → (CONTINUE)

27. Are you or is anyone in your household planning to subscribe to Internet/On-Line access at home for personal use within the next 12 months? ("X" ONE BOX)

Yes ☐ 1-61 → (SKIP TO Q.31a)
 No ☐ 2 → (SKIP TO INSTRUCTIONS BEFORE Q.36a)

28. Is your household's Internet/On-Line access provided by... ("X" ONE BOX)

@Home ☐ 1-62 Prodigy ☐ 7
 AOL ☐ 2 Another traditional Internet access provider ☐ 8
 AT&T Worldnet ☐ 3 Your primary Long Distance Company ☐ 9
 CompuServe ☐ 4 Your Local telephone company ☐ 0
 Earthlink/MindSpring ☐ 5 Your Local Cable company ☐ 6
 MSN ☐ 6 Another type of company ☐ 7

29. How many hours a week are you personally on the Internet at home for personal use? ("X" ONE BOX)

Less than 5 hours ☐ 1-63 10 to less than 20 hours ☐ 3
 5 to less than 10 hours ☐ 2 20 hours or more ☐ 4

30. What type of Internet connection does your household use? ("X" ONE BOX)

Conventional Phone Line ☐ 1-64 → (CONTINUE)
 High-Speed Cable Modem ☐ 2
 High-Speed DSL ☐ 3
 High-Speed ISDN ☐ 4
 Satellite ☐ 5
 High-Speed T1/T3/Fixed Wireless ☐ 6
 } → (SKIP TO Q.31b)

- 31a. High-speed Internet access can be provided at speeds up to 100 times faster than current dial-up phone modems. If this service is or becomes available within the next year, how likely would you be to subscribe to high-speed Internet access at approximately \$45 per month? ("X" ONE BOX)

Extremely likely ☐ 1-xx Not too likely ☐ 4
 Very likely ☐ 2 Not at all likely ☐ 5
 Somewhat likely ☐ 3

IF NO ON-LINE ACCESS IN Q.26, SKIP TO Q.36a.
 IF CONVENTIONAL PHONE LINE IN Q.30, SKIP TO Q.32.
 IF HIGH-SPEED/SATELLITE ACCESS IN Q.30, CONTINUE WITH Q.31b.

- 31b. How was your high-speed access installed? ("X" ONE BOX)

Self-installation ☐ 1-xx Necessary equipment/software came with computer ☐ 3
 Installed by company technician ☐ 2 Self-installed with assistance from company ☐ 4

- 31c. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate your overall experience with your high-speed installation? ("X" ONE BOX)

- 31d. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate your overall experience with your high-speed line provider? ("X" ONE BOX)

| | Unacceptable | | | | Average | | | | Outstanding | | |
|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| High-Speed Installation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (xx) |
| High-Speed Line Provider | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (xx) |

- 31e. Do you have more than one personal computer using the same high-speed access line in your home?

Yes ☐ 1-xx No ☐ 2

32. Have you or has anyone in your household ever made a personal local or long distance phone call over the Internet via a personal computer? ("X" ONE BOX)

Yes ☐ 1-xx No ☐ 2

33. How many times in the past 6 months have you visited the website of your Cable/Satellite Provider? (IF YOU HAVE BOTH CABLE & SATELLITE TV, ANSWER ABOUT YOUR SATELLITE TV PROVIDER WEBSITE ONLY)

of Times Visited Cable/Satellite Provider Website _____ (IF NONE WRITE IN "0" AND SKIP TO Q.36a)
 (00-99)

34. What were the main reasons that you visited the website of your Cable/Satellite TV provider? ("X" ALL THAT APPLY)

For information on additional services offered. ☐ 1-70 To change existing calling plan ☐ 5
 To pay bill ☐ 2 Other (SPECIFY)
 To review a bill ☐ 3
 To contact customer service ☐ 4 _____ ☐ 6
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35. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate your overall experience with the website of your Cable/Satellite TV provider? ("X" ONE BOX)

| | Unacceptable | | | | Average | | | | Outstanding | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (xx) |

NOW WE'D LIKE YOU TO THINK ABOUT GETTING MULTIPLE SERVICES FROM A SINGLE COMPANY.

- 36a. Currently in some areas, it is possible for the same company to offer local telephone, long distance telephone, cable/satellite TV, Internet/On-line access and/or cellular services. If you had the opportunity, how likely would you be to switch ALL your current subscription(s) to ONE company that offered all the services that you use? ("X" ONE BOX)

| | | | |
|--|--------------|--|------------------|
| Extremely likely <input type="checkbox"/> 1-73 | } (CONTINUE) | Not too likely <input type="checkbox"/> 4 | } (SKIP TO Q.38) |
| Very likely <input type="checkbox"/> 2 | | Not at all likely <input type="checkbox"/> 5 | |
| Somewhat likely <input type="checkbox"/> 3 | | Already use <u>one</u> company for all my telecommunication needs. <input type="checkbox"/> 6 | |

36b. Please indicate which type of company listed below you are most likely to select for all the local, long distance, cable/satellite TV, Internet/On-line access and/or cellular services in your household? ("X" ONE BOX)

Long distance..... ☐ 1-4 Satellite TV..... ☐ 4 Internet/On-line access..... ☐ 7
Local telephone..... ☐ 2 Cellular/PCS Telephone..... ☐ 5 Home Security Systems..... ☐ 8
Cable TV..... ☐ 3 Paging..... ☐ 6 Electric/Gas..... ☐ 9

36c. Why are you likely to choose this ONE type of company for all your telecommunication needs? ("X" TOP 3 REASONS.)

Convenience of having one company for all my telecommunication needs..... ☐ 1-75
Offers competitive/discounted prices..... ☐ 2
Receive a single bill for all telecommunication services..... ☐ 3
Only need to contact one company with any questions/problems..... ☐ 4
Easier to use services..... ☐ 5
Company would consider me a more valuable customer..... ☐ 6
It is the most technologically advanced provider of cable/satellite TV service..... ☐ 7
It is the industry leader..... ☐ 8
Provides the best service..... ☐ 9

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37. Of the services listed below, please indicate which 2 or more services you would ideally like to include in a package offered by one company. ("X" ALL THAT APPLY)

Long distance..... ☐ 1-14 Paging..... ☐ 6
Local telephone..... ☐ 2 Internet/On-Line access..... ☐ 7
Cable TV..... ☐ 3 Home Security Systems..... ☐ 8
Satellite TV..... ☐ 4 Electric/Gas..... ☐ 9
Cellular/PCS Telephone..... ☐ 5 Would Not Bundle Any Services..... ☐ 0

38. Think for a moment about the service providers you use now. Using a 1 to 10 point scale, where "1" is "Unacceptable", "10" is "Outstanding" and "5" is "Average", please rate each of the following providers that you use. ("X" ONE BOX ACROSS FOR EACH SERVICE YOU USE)

| | Unacceptable | | | | Average | | | Outstanding | | | |
|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| Internet Service Provider..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Electric Utility Provider..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Cellular/PCS Provider..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Long Distance Provider..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |
| Local Telephone Provider..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (XX) |

39a. Are you aware of whether or not your current Cable/Satellite provider has experienced a merger or combined with one or more separate companies? ("X" ONE BOX)

Yes..... ☐ 1-30 → (CONTINUE)
No..... ☐ 2 → (SKIP TO Q.40)

39b. How did you first find out about this merger? ("X" ONE BOX)

Company literature, mailouts, or billing inserts..... ☐ 1-31
Outside sources such as media or word-of-mouth..... ☐ 2

39c. What type of change in service, if any, have you experienced as a result of this merger? ("X" ONE BOX)

Positive change in service..... ☐ 1-32
Negative change in service..... ☐ 2
Have not noticed a change in service..... ☐ 3

THE FOLLOWING QUESTIONS ARE FOR CLASSIFICATION PURPOSES ONLY

40. Do you or anyone in your household own or operate an income producing business from your home or residence? ("X" ONE BOX)
- Yes ☐ 1-34 → (CONTINUE)
No ☐ 2 → (SKIP TO Q-42)
41. On average, how many hours each week, if any, do you expect to spend telecommuting from home, that is working from home on work-related activities for an employer over the next 12 months? ("X" ONE BOX)
- 0 hours per week ☐ 1-44 25-40 hours per week ☐ 4
1-8 hours per week ☐ 2 More than 40 hours per week .. ☐ 5
9-24 hours per week ☐ 3
42. In total, how many different phone numbers does your household have? For example, you could have one phone number for making calls and another separate phone number for a fax or modem. ("X" ONE BOX)
- One ☐ 1-37 Three ☐ 3
Two ☐ 2 Four or more ☐ 4
43. Are any of your individual household phone lines dedicated to just business use? ("X" ONE BOX)
- Yes ☐ 1-38 No ☐ 2
44. Do you or does anyone in your household own a personal computer? ("X" ONE BOX)
- Yes ☐ 1-39 No ☐ 2
45. How many functioning TV sets does your household own? (WRITE IN NUMBER) _____ (40-41)
46. In a typical week, how many hours are spent watching TV in your household in total? How many of these hours are spent watching TV on regular network channels (such as ABC, CBS, NBC, FOX or PBS)? And how many hours are spent on cable-related channels (such as A&E, CNN, ESPN, HBO etc.) excluding Pay-Per-View movies or events? And about how many hours would your household spend watching Pay-Per-View movies and events? (WRITE IN NUMBER OF HOURS ROUNDED TO THE NEAREST HOUR FOR EACH BELOW)
- Total TV Viewing Hours (42-44)
Regular Network Hours (45-47)
Cable station hours (48-50)
Pay-Per-View hours (51-53)
- 47a. Approximately how many videos (videotapes or DVD's) does your household rent from local video stores in an average month?
- (WRITE IN NUMBER) VIDEOS (54-56)
- 47b. Currently in some areas it is possible to order movies through your Cable/Satellite TV company for viewing. Unlike Pay-Per-View, you can order your choice of movies to start at a time convenient to you. Have you ever ordered a "Video-On-Demand" from your Cable/Satellite/Internet provider?
- Yes ☐ 1-52 No ☐ 2
- 47c. If "Video-On-Demand" were available to you, how likely are you to order using "Video-On-Demand" in the next 12 months?
- Extremely likely ☐ 1-53 Not too likely ☐ 4
Very likely ☐ 2 Not at all likely ☐ 5
Somewhat likely ☐ 3
48. Would you describe your current location as... ("X" ONE BOX)
- Urban ☐ 1-57 Suburban ☐ 2 Rural ☐ 3
49. How many years have you been at your current residence? _____ (ROUND TO THE NEAREST YEAR)
(58-59)
50. Please indicate your gender: Male ☐ 1-60 Female ☐ 2

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THANK YOU FOR HELPING WITH THIS IMPORTANT SURVEY! PLEASE RETURN THIS COMPLETED QUESTIONNAIRE IN THE ENCLOSED POSTAGE PAID ENVELOPE.